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USPTO GPAU 2816

FROM:

Paul J. Polansky / Myza

Reg. No. 33,992

RE:

REPLY TO NON-FINAL OFFICE ACTION

U.S. APP NO.:

10/809,195

FILING DATE:

03/25/2004

APPLICANT(S):

Scott D. Willingham et al.

ATTY DKT NO.:

1052-0012

TITLE:

RADIO FREQUENCY CMOS BUFFER CIRCUIT AND METHOD

NO. OF PAGES (INCL. COVER SHEET): 21

MESSAGE:

Attached please find:

PTO/SB/21 Transmittal Form (1 pg.)

PTO/SB/17 Fee Transmittal (1 pg.)

Reply to Non-Final Office Action (18 pgs.)

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TL&A 512-327-5452

NO. 2938 P. 2

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Hadartha Danasundi Cashalias and as ass	ne .	U.i	6. Patent and 1	rademark Offici	se through 07/31/2006. OMB 0851-0031 ; U.S. DEPARTMENT OF COMMERCE	
TRANSMITTAL FORM		Application Number		lection of Information unless it displays a valid OMB control number. 10/809,195 03/25/2004 Scott D. Willingham		
		Filing Date				
		First Named Inventor				
		Art Unit	2816	2816		
(to be used for all correspondence after initial filing)		. Examiner Name	NGUYE	NGUYEN, Long T.		
Total Number of Pages in This Submission 20		Attorney Docket Number	1052-00	1052-0012		
ENCLOSURES (Check all that apply)						
Fee Transmittal Form Fee Attached		Drawing(s) Licensing-related Papers		After Allowance Communication to TC Appeal Communication to Board of Appeals and Interferences		
After Final After Final Aftidavits/declaration(s) Extension of Time Request Express Abandonment Request Information Disclosure Statement Certified Copy of Priority Document(s)		Petition Petition to Convert to a Provisional Application Power of Attorney, Revoca Change of Correspondence Terminal Disclaimer Request for Refund CD, Number of CD(6) Landscape Table on rks ner Number 34458	e Address	ddress Status Letter Other Enclosure(s) (please Identify below):		
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Complete if Known Effective on 12/08/2004. pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). 10/809,195 Application Number FEE TRANSMIT 03/25/2004 Filing Date For FY 2005 Scott D. Willingham First Named Inventor NGUYEN, Long T. Examiner Name Applicant claims small entity status. See 37 CFR 1.27 2816 Art Unit 1052-0012 TOTAL AMOUNT OF PAYMENT 150.00 Attorney Docket No. METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order None Other (please identify): Deposit Account Name: TOLER, LARSON & ABEL, LLP 50-2469 Deposit Account Deposit Account Number; For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) Indicated below, except for the filing fee Charge any additional fee(s) or underpayments of fee(s) |**/**| Credit any overpayments under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. **FEE CALCULATION** 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **EXAMINATION FEES FILING FEES** SEARCH FEES Small Entity Small Entity Small Entity Fee (\$) Fee (\$) Fee (\$) Fees Pald (\$) **Application Type** Fee (\$) Fee (\$) Fee (\$) 200 Utility 150 500 250 100 Design 200 100 100 50 130 65 Plant 200 100 300 150 160 80 Reissue 300 150 500 250 600 300 0 **Provisional** 200 100 0 0 0 Small Entity 2. EXCESS CLAIM FEES Fee (\$) <u>Fee (\$)</u> Fee Description 50 25 Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent 200 100 360 180 Multiple dependent claims Multiple Dependent Claims Total Claims Extra Claims Fee (\$) Fee Paid (\$) 150 - 20 or HP = 50 Eee (\$) Fee Paid (\$) HP = highest number of total claims paid for, if greater than 20 Fee (\$) Fee Paid (\$) Extra Claims Indep. Claims 200 - 3 or HP = HP = highest number of independent claims paid for, if greater than 3 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Number of each additional 50 or fraction thereof Fee Paid (\$) Fee (\$) Extra Sheets **Total Sheets** (round up to a whole number) X - 100 = Fees Paid (\$) 4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) SUBMITTED BY Registration No. (512) 327-5515 Telephone 33,992 Signature (Attomety/Agent) Date 9 Name (Print/Type . Polansky

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